

TULARE COUNTY SHERIFF'S DEPARTMENT EXPLORER PROGRAM APPLICATION

RELEASE WAIVER FOR RECORDS AND INFORMATION

(Please read carefully before signing)

To whom it may concern:

In order for me to be considered as a prospective member of the Tulare County Sheriff's Department Explorer Program, I hereby authorize and agree to have the agencies below confirm my credibility as a good candidate for the position. This confirmation will include a background investigation as well as a "Live Scan" fingerprint scanning.

I further agree to save and hold any institution, it's officer and employees harmless of and from any and all injury or embarrassment to myself arising from any cause related to the inspection of my records or credibility.

This information I freely give to the advisor of the Tulare County Sheriff's Department Explorer Program Post #355.

PLEASE TYPE OR PRINT LEGIBLY

Full Name

Date

Signature:

Parent or Guardian Name

Date

Signature:

TULARE COUNTY SHERIFF'S DEPARTMENT

Agency

School Attending

GPA

Contact Name

Phone

Do you have a record? []Yes []No
Juvenile?

Were you an []Adult or []

Probation Officer / Contact

Phone

Post Advisor Name

Date

Signature:

